

PROJECT FACILITY COMMITMENT FORM

SEWER

| TROJECT FACILITY COMMITTIMENT | 1 OTTIVI | SEWER |
|---|-----------------------------|----------------------------------|
| Please type or use pen | ORG | S |
| Owner's Name Phone | ACCT | • |
| - Thore | ACT | |
| Owner's Mailing Address Street | TASK | |
| | DATE | AMT \$ |
| City State Zip | DISTRICT (| CASHIER'S USE ONLY |
| SECTION 1. PROJECT DESCRIPTION | TO BE O | COMPLETED BY APPLICANT |
| Major Subdivision (TM) Case No. Minor Subdivision (TPM) Case No. | (Add extra if necessary) | |
| Major Use Permit (MUP) Case No | | |
| Certificate of Compliance | | |
| Other | | |
| 2. Residential Total number of dwelling units | | |
| Commercial Gross floor area | | |
| Industrial Gross floor area Other Gross floor area | | |
| Total Project acreageTotal lotsSmallest proposed lot | Thomas Bros. Page | Grid |
| Yes No 4. Is the project proposing its own wastewater treatment plant? Is the project proposing the use of reclaimed water? | Project address | Street |
| is the project proposing the too of restauring materia. | Community Planning Area | |
| Applicant's Signature: | _ Date: | |
| Address: (On completion of above, present to the sewer district with appropriate | Phone: | nmitment Section B helew |
| SECTION 2: FACILITY COMMITMENT | | |
| Pursuant to the Public Facility Element of the General Plan and County Board of Supervisors Policy I-84, commitment must be for a period of at least years. Commitment must be obtained within the three months prior to the date of final action by the approving authority. THIS IS NOT A WASTEWATER DISCHARGE PERMIT , and capacity fees are subject to increase prior to issuance of a discharge permit. | | |
| District name Service area | a | |
| Amount of capacity committed for this project: Optional Number of EDIJs | EDUs. | posity Food: ¢ |
| Optional: Number of EDUs x Connection Fees \$ = Total Capacity Fees: \$ (These fees are not refundable.) | | |
| Facility capacity has been committed pursuant to a binding agreement satisfactory to the district. Expiration date:(Commitment must be for a minimum of two years. If no expiration date, please so specify.) | | |
| ☐ Facility capacity is committed for this project until (Termination date of this letter must be at | | |
| least two years from the date of issuance.) The District Board of Directors has certified that public agency facilitie received. Capacity for this project is committed for a period of at least improvements come on-line. Scheduled (not guaranteed) start-up dat until: (if no expiration date, please so specify). | t two years from the time t | hat the public agency's facility |
| (II TIO EXPITATION GAICS, PICAGE 30 SPECITY). | | |
| | | |
| Authorized signature F | Print name | |
| rint title Phone | | |
| On completion of Section B by the District, applicant is to submit this form to | | |
| the Department of Public Works, Final Maps or Grading, 5201 Ruffin Road, San Diego, CA 92123 | | |